



|  |                                  |  |                             |                                 |
|--|----------------------------------|--|-----------------------------|---------------------------------|
| AMENDMENT TRANSMITTAL LETTER   |                                  |  |                             | Docket No.<br>04607/0203010-US0 |
| Application No.<br>10/539,910-Conf. #6548  | Filing Date<br>June 15, 2005     | Examiner<br>T. Hailu                             | Art Unit<br>2139            |                                 |
| Applicant(s): Bernard Parsons et al.   |                                  |  |                             |                                 |
| Invention: SECURITY SYSTEM AND METHOD  |                                  |  |                             |                                 |
| <b>TO THE COMMISSIONER FOR PATENTS</b>   |                                  |  |                             |                                 |
| Transmitted herewith is an amendment in the above-identified application.  |                                  |  |                             |                                 |
| The fee has been calculated and is transmitted as shown below.   |                                  |  |                             |                                 |
| <b>CLAIMS AS AMENDED</b>   |                                  |  |                             |                                 |
|  | Claims Remaining After Amendment | Highest Number Previously Paid                   | Number Extra Claims Present | Rate                            |
| Total Claims   | 19                               | - 20 =   | 0                           | x 25.00 0.00                    |
| Independent Claims   | 3                                | - 3 =  | 0                           | x 105.00 0.00                   |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/>   |                                  |  |                             |                                 |
| Other fee (please specify): Extension for response within third month 525.00   |                                  |  |                             |                                 |
| <b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b> 525.00   |                                  |  |                             |                                 |
| <input type="checkbox"/> Large Entity  |                                  | <input checked="" type="checkbox"/> Small Entity |                             |                                 |
| <input type="checkbox"/> No additional fee is required for this amendment.   |                                  |  |                             |                                 |
| <input type="checkbox"/> Please charge Deposit Account No. 04-0100 in the amount of \$ . A duplicate copy of this sheet is enclosed.       |                                  |  |                             |                                 |
| <input checked="" type="checkbox"/> A check in the amount of \$ 525.00 to cover the filing fee is enclosed.                                |                                  |  |                             |                                 |
| <input type="checkbox"/> Payment by credit card.   |                                  |  |                             |                                 |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 04-0100 as described below. |                                  |  |                             |                                 |
| <input checked="" type="checkbox"/> Credit any overpayment.  |                                  |  |                             |                                 |
| <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.       |                                  |  |                             |                                 |
| <br>Pierre R. Yanney<br>Attorney/Agent Reg. No.: 35,418 |                                  |  |                             |                                 |
| Dated: May 14, 2008  |                                  |  |                             |                                 |
| DARBY & DARBY P.C.<br>P.O. Box 770<br>Church Street Station<br>New York, New York 10008-0770<br>(212) 527-7700                             |                                  |  |                             |                                 |



Docket No.: 04607/0203010-US0  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Bernard Parsons et al.

Application No.: 10/539,910

Confirmation No.: 6548

Filed: June 15, 2005

Art Unit: 2139

For: SECURITY SYSTEM AND METHOD

Examiner: T. Hailu

**AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION**

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

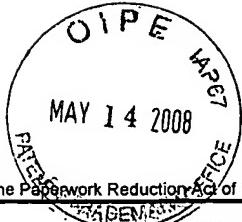
Dear Sir:

**INTRODUCTORY COMMENTS**

In response to the Office Action dated November 14, 2007, please amend the above-identified U.S. patent application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 7 of this paper.



PTO/SB/17 (10-07)

Approved for use through 06/30/2010. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

## FEE TRANSMITTAL For FY 2008

Applicant claims small entity status. See 37 CFR 1.27

|                         |      |        |
|-------------------------|------|--------|
| TOTAL AMOUNT OF PAYMENT | (\$) | 525.00 |
|-------------------------|------|--------|

|                    |                        |
|--------------------|------------------------|
| Application Number | 10/539,910-Conf. #6548 |
|--------------------|------------------------|

|             |               |
|-------------|---------------|
| Filing Date | June 15, 2005 |
|-------------|---------------|

|                      |                 |
|----------------------|-----------------|
| First Named Inventor | Bernard Parsons |
|----------------------|-----------------|

|               |          |
|---------------|----------|
| Examiner Name | T. Hailu |
|---------------|----------|

|          |      |
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| Art Unit | 2139 |
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|                     |                   |
|---------------------|-------------------|
| Attorney Docket No. | 04607/0203010-US0 |
|---------------------|-------------------|

**METHOD OF PAYMENT** (check all that apply)

|  |   |                                      |                               |   |
|--|---|--------------------------------------|-------------------------------|---|
| <input checked="" type="checkbox"/> Check  | <input type="checkbox"/> Credit Card  | <input type="checkbox"/> Money Order | <input type="checkbox"/> None | <input type="checkbox"/> Other (please identify): _____ |
| <input type="checkbox"/> Deposit Account   | Deposit Account Number: 04-0100   |                                      |                               | Deposit Account Name: Darby & Darby P.C.                |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)                 |   |                                      |                               |   |
| <input type="checkbox"/> Charge fee(s) indicated below   | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |                                      |                               |   |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments                       |                                      |                               |   |

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
|                  | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility          | 310         | 155                   | 510         | 255                   | 210              | 105                   |                |
| Design           | 210         | 105                   | 100         | 50                    | 130              | 65                    |                |
| Plant            | 210         | 105                   | 310         | 155                   | 160              | 80                    |                |
| Reissue          | 310         | 155                   | 510         | 255                   | 620              | 310                   |                |
| Provisional      | 210         | 105                   | 0           | 0                     | 0                | 0                     |                |

**2. EXCESS CLAIM FEES****Fee Description**

|  |     |     |
|--|-----|-----|
| Each claim over 20 (including Reissues)            | 50  | 25  |
| Each independent claim over 3 (including Reissues) | 210 | 105 |
| Multiple dependent claims                          | 370 | 185 |

| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims |
|--------------|--------------|----------|---------------|---------------------------|
| 20           | - 20 = 0     | x 25.00  | = 0.00        | Fee (\$)                  |

HP = highest number of total claims paid for, if greater than 20.

| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |
|---------------|--------------|----------|---------------|
| 3             | - 3 = 0      | x 105.00 | = 0.00        |

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
|              | - 100 =      | /50 = (round up to a whole number) x             | =        |               |

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 2253 Extension for response within third month

525.00

| SUBMITTED BY      |                  |                                      |              |           |                |
|-------------------|------------------|--------------------------------------|--------------|-----------|----------------|
| Signature         |                  | Registration No.<br>(Attorney/Agent) | 35,418       | Telephone | (212) 527-7700 |
| Name (Print/Type) | Pierre R. Yanney | Date                                 | May 14, 2008 |           |                |

05-16-08

11<sup>th</sup> 2139 \$



Application No. (if known): 10/539,910

Attorney Docket No.: 04607/0203010-US0

## Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. **EM 059508725-US** in an envelope addressed to:

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

on May 14, 2008  
Date

Signature

Typed or printed name of person signing Certificate

**Registration Number, if applicable**

**Telephone Number**

**Note:** Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal (1 page)  
Petition for Extension of Time (1 page)  
Amendment (10 pages)  
Amendment Transmittal (1 page)  
Check # 13726 for \$525.00  
Return Receipt Postcard